PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

100575534

									TONDIDA				
	•	CLAIMS	AS FILED				SMALL ENT		TITY	OR	OTHER SMALL E		
U.S. NATIONAL STAGE FEES			(Column 1)		(Column 2)		1] 1			
 -		STAGE FEES					RAT	E 	FEE		RATE	FEE	
BASIC FEE			<u> </u>				BASIC FE	E		OR	BASIC FEE	300	
EXAMINATION FEE							EXAM. FE	E			EXAM. FEE	2∞	
SEARCH FEE							SEARCH	FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			mir	nus 100 =		/ 50 =	X \$ 12	5 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			16 m	inus 20 =	*		X \$ 25	5 =		OR	X \$ 50 =		
INDEPENDENT CLAIMS			i minus 3 = *				X \$ 10	0 =		OR	X \$ 200 =	,	
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT				+ \$ 18	0 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, ent)" in co	lumn 2	TOTA	L		OR	TOTAL	9∞.	
CLAIMS AS AMENDED - PART II OTHER THAN													
(Column 1) (Column 2) (Column 3)								L EI	YTITY	OR	OTHER I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X \$ 25	=		OR	X \$ 50 =		
	Independent	*	Minus	***		11	X \$ 10) =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180) =		OR	+ \$ 360 =		
						/	TOTAL AL	DIT.		OR	TOTAL ADDIT. FFF		
		(Column 1)		(Colun	nn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X \$ 25	=]		OR	X \$ 50 =		
	Independent	*	Minus	***.		=	X \$ 100) =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180) =		OR	+ \$ 360 =		
							TOTAL AD	DIT.		OR	TOTAL ADDIT. FFF		
								_			_		
*	If the entry in colo	umn 1 is less than th	e entry in column	2 write "O" in	n coliumr	,							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".													
	The "Highest Nur	mber Previously Pak	d For" (Total or In	dependent) is	the high	nest number found	in the appropria	e box	in column 1				

FORM PTO-875 (Rev. 02/2005)

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